



## **MINUTES**

### **REGULAR MEETING OF THE MENTAL HEALTH COMMISSION NOVEMBER 11, 2025 – 3:30 P.M.**

The Mental Health Commission Regular Meeting was held on Tuesday, November 11, 2025, at 3:30 p.m. in the MHSA Administrative Office located at 2001 North Garey Avenue, Pomona, California.

**CALL TO ORDER** Chair Henderson called the meeting to order at 3:34 p.m.

**ROLL CALL** Roll call was taken by JPA Administrator/Clerk Olmos.

#### **MENTAL HEALTH COMMISSION**

**PRESENT:** Anne Henderson, Chair  
Wray Ryback, Vice-Chair  
Clarence D. Cernal  
Sandra Christensen  
Frank Guzman  
Laura Mundy  
Janet R. Roy  
Danette E. Wilkerson

**ABSENT:** Mildred Garcia  
Ethel Gardner

#### **STAFF**

**PRESENT:** Ontson Placide, Executive Director  
Elizabeth Renteria, Chief Clinical Officer  
Dana Barford, Director of MHSA & Ethnic Services  
Mica Olmos, JPA Clerk/Administrator

### **REGULAR BUSINESS**

#### **I. APPROVAL OF MINUTES OF THE OCTOBER 14, 2025 REGULAR MEETING OF THE MENTAL HEALTH COMMISSION**

There being no discussion or public comment, Commissioner Cernal moved, and Commissioner Christensen seconded, to approve the Minutes from the October 14, 2025, Regular Meeting of the Mental Health Commission. The motion was carried by the following vote: AYES: Commissioners Cernal, Christensen, Mundy, Roy, and Wilkerson; Vice-Chair Ryback, and Chair Henderson. NOES: None. ABSTAIN: Commissioner Guzman. ABSENT: Commissioner Garcia and Gardner.

**II. PRESENTATION – OVERVIEW OF TRI-CITY MENTAL HEALTH AUTHORITY'S MOBILE CRISIS CARE UNIT (MCCU) AND CO-OCCURRING SUPPORT TEAM (COST)**

Clinical Program Manager Markie Sterner provided an overview of the MCCU and COST objectives and recent activities. She stated MCCU focused on delivering crisis care services to clients and community members, which included de-escalation strategies and consultation with community partners. Additional objectives encompassed linkage to services, stabilization, outreach, and assistance in connecting individuals to higher levels of care. She said the team worked collaboratively with internal staff, local police departments, school districts, and other community partners to ensure comprehensive support.

Clinical Program Manager Sterner presented a current staffing overview, noting open positions and recent progress in recruitment. She reported a new clinical therapist had started the previous day, and interviews were underway with pending offer letters and background checks in process.

Clinical Program Manager Sterner highlighted key collaborations with partners such as Pomona Unified School District (PUSD), Claremont Unified School District (CUSD), Bonita Unified School District (BUSD), the School of Arts and Enterprise, Claremont and La Verne Police Departments, Pomona Valley Hospital (PVH), Pomona Police Department, and various community members. Support provided to these partners continued to increase.

Clinical Program Manager Sterner presented program data for April through June 2025 reflected 75 calls, 73 of which resulted in dispatch and services. These calls involved 56 unique individuals. Response times were strong, with 74 calls addressed in less than one hour and only one call requiring between one and two hours. Services frequently included de-escalation and conflict resolution. Demographic data showed that 46% of individuals served were ages 25–44, while 27% were ages 45–64.

Clinical Program Manager Sterner then shared a success story involving a local high school student experiencing active suicidal ideation. She shared the team collaborated with the student, school staff, and parents, providing education on suicide prevention. The intervention resulted in voluntary hospitalization, emphasizing voice and choice for better long-term outcomes. Follow-up efforts were discussed, with Clinical Program Manager Sterner noting that adjustments are made based on individual needs.

Vice-Chair Ryback asked about response time goals, and Clinical Program Manager Sterner confirmed that the target was one hour. Chief Clinical Officer Renteria added that calls are answered immediately, and once an in-person response is deemed necessary, staff arrive within the hour. Vice-Chair Ryback inquired about partnerships with Casa Colina, Chief Clinical Officer Renteria offered to provide a contact person.

Commissioner Cernal inquired about training for police departments and schools on when to call the team. Clinical Program Manager Sterner explained that regular meetings and briefings were held with La Verne and Claremont PD, along with ongoing consultations.

Clinical Program Manager Sterner also provided an update on the Co-Occurring Support Team (COST), which offers substance use disorder (SUD) support. She stated the team's objectives include assisting active clients, supported by three counselors. She shared a success story involving a client in their late 20s with severe alcohol abuse and related medical concerns.

Through persistent engagement, the client entered a rehabilitation program and had maintained sobriety for 30 days.

Looking ahead, Clinical Program Manager Sterner reported that COST was awaiting approval to transition to Drug Medi-Cal services. Paperwork had been submitted, and once approved, the team would expand its capacity to provide in-house treatment rather than outsourcing services. Chief Clinical Officer Renteria explained that this shift would allow for more comprehensive care under BHSA transformation, creating a “one-stop shop” for SUD treatment. She stated four applications had been submitted, with three returned for feedback and although the process was lengthy, the team expressed excitement about future growth.

### **III. EXECUTIVE DIRECTOR MONTHLY REPORT**

Executive Director Placide reported that overall planning for the transition from MHSA to BHSA was in progress. He stated the team had been working on an integrated plan, which was expected to be a large and comprehensive document requiring full collaboration. Executive Director Placide noted that the process would involve multiple revisions and that additional information would be presented as it became available.

Executive Director Placide continued by emphasizing the importance of collaboration with the Department of Mental Health (DMH) to ensure alignment. He noted that while both agencies had different plans, efforts were underway to make sure they worked together effectively.

Executive Director Placide also provided an update on housing initiatives stating at the Pomona City Council meeting on November 3rd, the tiny homes project had been approved. TCMHA was awaiting confirmation from St. Ambrose regarding the construction of 59 units, of which 16 would be allocated to the program, serving an additional 29 units.

As a result of the BHSA transformation, Executive Director Placide stated work had begun on infrastructure development, including hiring staff and establishing appropriate administrative processes. Preliminary data on CLIA tax revenue indicated approximately \$2 billion more than Los Angeles County. He stated since BHSA funding comes from millionaire tax revenue, projections had initially suggested a decline; however, recent increases raised hopes that allocations might be higher than expected. Executive Director Placide stated that the team remained vigilant and focused on preparations for the coming year.

Vice-Chair Ryback asked for an explanation of Proposition 36. Executive Director Placide explained that the measure was intended to help individuals in need of drug treatment by diverting them from criminalization to care. However, this goal had not been fully realized due to a lack of services. Executive Director Placide noted that while stigma surrounding congregate and residential treatment had decreased over the years, significant work remained. He stated reports indicated that outcomes were not as anticipated, with more individuals being arrested rather than receiving treatment.

### **COMMISSION ITEMS AND REPORTS**

Vice-Chair Ryback provided an update regarding MCCU outreach efforts, stating flyers have been distributed to PVH’s Social Services Department and Emergency Department Care teams to ensure broader awareness and engagement. Chief Clinical Officer Renteria expressed

appreciation for the ongoing collaboration and confirmed that progress on current initiatives is proceeding well.

Chair Henderson inquired about the status of the work group assigned to the data notebook project, seeking confirmation that work is moving forward as planned. Commissioner Wilkerson reported that the data notebook had been submitted and noted that a PowerPoint presentation was currently being prepared for the upcoming December joint meeting.

### **PUBLIC COMMENT**

Chair Henderson opened the meeting to Public Comment, there were no comments.

### **ADJOURNMENT**

At 4:00 p.m., on consensus of the Mental Health Commission its meeting of November 11, 2025, was adjourned. The next Regular Joint Meeting of the Governing Board and Mental Health Commission will be held on Wednesday, December 18, 2025 at 5:00 p.m., in the MHSA Administrative Office, 2001 North Garey Avenue, Pomona, California.

---

Micaela Perez Olmos, CPMC  
JPA Administrador/Clerk